if continuation sheet, 1 of 2

Division of Health Service Regulation STATEMENT OF DEPICIENCIES (X1) PROVIDER/SUPPLIER/CL/A AND PLAN OF CORRECTION (X2) MULTIPLE CONSTRUCTION IDENTIFICATION NUMBER: (X3) DATE SURVEY A. BUILDING: 01 COMPLETED FCL053014 B. WING 07/01/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE IMPACT FAMILY CARE HOME 211 RED HOLLY DRIVE SANFORD, NC 27330 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) (EACH CORRECTIVE ACTION SHOULD BE TAG CROSS-REPERENCED TO THE APPROPRIATE TAG DEFICIENCY) C 000 Initial Comments C 000 Anannual facility evaluation
is already in place for
RIV review. Facilities Report by Glenn Hoppin DHSR Construction Section conducted a Biennial Survey on July 01, 2015 from 12:30pm until 2:00pm at the above referenced facility. DHSRrecords indicate the home was first licensed on August 05, 2004 as a Family Care Home for six has now been added to ambulatory residents (able to evacuate and respond without any physical or verbal assistance this form with Gonstrollin during a fire or other emergency). Based on this Regulations being added for evaluation. information we are requiring the home to maintain compliance with the following: the 1992 "Rules for Family Care Homes Minimum and Desired Standards and Regulations", the applicable An annual Construction portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, and the 2002 North Carolina State Building Code - Section 421.2 review has now been Residential Care Homes. inplemented with Dwner and administrator signature required annually. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows: C 174; Building Equipment Maintained Safe, Operating C 174 SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, CONSTRUCTION SECTION mechanical, and plumbing equipment in a family care home shall be maintained in a safe and AUG 1 0: 2015 operating condition. (i) This Rule shall apply to new and existing RECEIVED family care homes. This Rule is not met as evidenced by: The kitchen range hood is missing the grease filter, the lightbulb and lense cover. Have a Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATUR. TITLE (X6) DATE Owner STATE FORM

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Division of Health Service Regulation STATEMENT OF DEFICIENCIES FORM APPROVED (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION (XZ) MULTIPLE CONSTRUCTION IDENTIFICATION NUMBER: (X3) DATE SURVEY A BUILDING: 01 COMPLETED FCL053014 B, WING NAME OF PROVIDER OR SUPPLIER 07/01/2015 STREET ADDRESS, CITY, STATE, ZIP CODE IMPACT FAMILY CARE HOME 211 RED HOLLY DRIVE SANFORD, NC 27330 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PROVIDER'S PLAN OF CORRECTION REGULATORY OR LSC IDENTIFYING INFORMATION) TAG (EACH CORRECTIVE ACTION SHOULD BE PREFIX (X5) COMPLETE CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) C 174 Continued From page 1 C 174 qualified technician repair or replace the range Range hood will be purch ased & replaced by Sept 27, 2015 hood. Provide the DHSR Construction Section with documentation confirming the repair. The front ramp has rotted wood in several Rotted wood boas a) really been replaced. Wood had alrelly locations. Have a qualified technician replace the rotted wood. Provide documentation to the DHSR Construction Section when all repairs have been purchased Project comp Completion will require 9-27-15 arging of the wood used, 9-27-15 Arging of the wood used. Handrails have been added. been completed. The handrails on the front ramp do not go all the way to grade. Also on the inside of the ramp there are no handralls. Have a qualified technician install handrails on the inside of the ramp and extend the handrails all the way to ground level. Provide documentation to the DHSR Construction section when all repairs are completed. Rotted siding has been replaced On the corner of the house near the left side of the garage door the siding is rotted. Have a qualified technician repair or replace the rotted siding. Provide documentation to the DHSR Construction section when all repairs are completed In several areas on the exterior of the home Whole howe painting began on Aug 7,2015-To be completed NLT the paint is faded and peeling. Have a qualified technician prep and paint any areas that need painting. Provide documentation to the DHSR Construction section when all repairs are completed. Division of Health Service Regulation